-Docket No.:

DECLARATION AND POWER OF ATTORNEY

	and sole inventor	(if only one name is listed below)	tizenship are as stated below next to my or an original, first and joint inventor (if s sought on the invention entitled:
the application of which is attached hereto	OR	was filed on as United States Application N Number (Confirmation No	Jumber or PCT International Application
I hereby state that I have reviewed and by any amendment specifically referred		ontents of the above identified app	ication, including the claims, as amended
I acknowledge the duty to disclose continuation-in-part application(s), mat the national or PCT international filing	terial information	which became available between t	defined in 37 CFR 1.56, including for he filing date of the prior application and
breeder's rights certificate(s), or 365(a) United States of America, listed below	of any PCT intervand have also in the contract of the contract	rnational application(s) which desi dentified below, by checking the b	pplication(s) for patent, inventor's or plant gnated at least one country other than the sox, any foreign application(s) for patent, having a filing date before that of the
The transfer of the Miner boards	Coun	try Filing Date	Priority Claimed Yes No
Prior Application Number(s) ES P 200300362	SPAIN	February 14, 2003	× □
I hereby claim benefit under 35 United App	States Code §119		application(s) listed below.
application(s) designating the United S not disclosed in a listed prior United St United States Code, §112, I acknowle	States, listed below tates or PCT Inten- edge my duty to	and, insofar as the subject matter national application in the manner disclose any information material	on(s) or §365(c) of any PCT International of each of the claims of this application is provided by the first paragraph of Title 35 to the patentability of this application as and the national or PCT international filing
Prior U.S. or International Application 1	Prior U.S. or International Application Number(s)		Status
I hereby appoint all attorneys of SUG	HRUE MION, I	PLLC who are listed under the U	SPTO Customer Number shown below as

I hereby appoint all attorneys of SUGHRUE MION, PLLC who are listed under the USPTO Customer Number shown below as my attorneys to prosecute this application and to transact all business in the United States Patent and Trademark Office connected therewith, recognizing that the specific attorneys listed under that Customer Number may be changed from time to time at the sole discretion of Sughrue Mion, PLLC, and request that all correspondence about the application be addressed to the address filed under the same USPTO Customer Number.

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PATENT TRADEMARK OFFICE

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:							
Given Name (first and middle [if any]) Angel	Family Name or Surname LORENZO BARROSO						
Inventor's Signature	- Commo	·	Date	12/16/03			
Residence: City Argentona	State	Country Spain		Citizenship Spanish			
Mailing Address: Pol. Ind. El Cros - Torrent Mada s.n.							
City Argentona	State	Zip 08310		Country Spain			
NAME OF SECOND INVENTOR:							
Given Name (first and middle [if any]) Family Name or €€€€€€							
Inventor's Signature		·	Date				
Residence: City	State	Country		Citizenship			
Mailing Address:							
City	State	Zip		Country			
NAME OF THIRD INVENTOR:							
Given Name (first and middle [if any])		Family Name or Surname					
Inventor's Signature		Date					
Residence: City	State	Country		Citizenship			
Mailing Address:							
City	State	Zip		Country			
NAME OF FOURTH INVENTOR:							
Given Name (first and middle [if any])	Family Name or Surname						
Inventor's Signature		Date					
Residence: City	State	Country		Citizenship			
Mailing Address:				,			
City	State	Zip		Country			
NAME OF FIFTH INVENTOR:							
Given Name (first and middle [if any]) Family Name or Surname							
Inventor's Signature			Date				
Residence: City	State	Country		Citizenship			
Mailing Address:							
City	State	Zip		Country			